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10/697,104

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Application Number

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| TRANSMITTALE | | | Filing Date | | October 31, 2003 | | | | | | |
|---|------------------|--|--|--|---|--|--|--|--|--|--|
| FORM 9007 1 1 2005 | | | First Named Inventor | | Eisaku Tozaka | | | | | | |
| | | | Art Unit | | 1772 | | | | | | |
| | | | Examiner Name | | Nasser Ahmad | | | | | | |
| (to be used for all correspond Total Number of Pages in This | s Sharings | nitial filling) | Attorney Docket No | ımber | 001309.00 | | | | | | |
| Total Harrison of August 1 | | | | | - | | | | | | |
| ENCLOSURES (check all that apply) | | | | | | | | | | | |
| Fee Transmittal Form | ☐ Drawing(s) | | | After Allowance Communication to TC | | | | | | | |
| Fee Attached | | Licensing | related Papers | | Appeal Communication to Board of Appeals and Interferences | | | | | | |
| Amendment / Reply | | Petition | | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | | | | | | |
| I After Final | | | Convert to a al Application | | Proprietary Information | | | | | | |
| Affidavits/declaration | n(s) | | Attorney, Revocation f Correspondence Add | ress | Status Letter | | | | | | |
| Extension of Time Reque | Terminal I | Terminal Disclaimer | | | Other Enclosure(s) (please identify below): | | | | | | |
| Express Abandonment Request | | Request for Refund | | | Certified English Translation of Japanese Priority Document P2002-321544 | | | | | | |
| ☐ Information Disclosure Statement | | CD, Number of CD(s) Landscape Table on CD | | | | | | | | | |
| Certified Copy of Priority Document(s) | | Remarks | | | _ | | | | | | |
| Reply to Missing Parts/ | | | | | | | | | | | |
| Incomplete Application | | | | | | | | | | | |
| Reply to Missing Pa | | | | | | | | | | | |
| under 37 CFR1.52 o | or 1.53 | | | | | | | | | | |
| | SIGN | NATURE OF | APPLICANT, ATTO | RNEY, OF | RAGENT | | | | | | |
| Firm | Banner & Witcoff | | | | | | | | | | |
| Signature | | | | | | | | | | | |
| Printed Name | | Susan A. Wolffe | | | | | | | | | |
| Date | | October 11, 2005 Reg. No. | | | 33,568 | | | | | | |
| CERTIFICATE OF TRANSMISSION/MAILING | | | | | | | | | | | |
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| Signature | X | sun | 9 | | | | | | | | |
| Typed or printed name | | | | | Date | | | | | | |

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| Effective on 12/08/2004. Fees pursuent to the Consolidated Appropriations Act, 2005 (H ₋ R ₋ 4 518). | | | | Complete if Known | | | | | | |
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| FEE TI | RANS | MITT | ALIPEN | Application Number | 10/697,10 |)4 | | | | |
| for | · EV | 2005 | f | Filing Date | October 3 | 1, 2003 | | | | |
| 10 | | | OCT 1 1 2005 | First Named Inventor | Eisaku To | zaka | | | | |
| Applicant claims sma | | tus. See | FR 1.27 | Examiner Name | Nasser Al | nmad | | | | |
| | | | DEMARK OF | Art Unit | 1772 | | | | | |
| TOTAL AMOUNT OF PA | AYMENI | (\$) 00 | | Attorney Docket No. | 001309.00 | 0051 | | | | |
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| | 7 CFR 1.16 a | and 1.17 | | | ncluded on this | form. Provide c | redit card information and | | | |
| authorization on PTO-2038. | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | |
| 1. BASIC FILING, SE | ARCH, AN FILING | FEES | SEAR | RCH FEES | | ATION FEES | | | | |
| Application Type | Fee (\$) | Small Entite Fee(\$) | <u>Y</u> Fee(\$ | Small Entity (i) Fee(\$) | Fee(\$) | Small Entity Fee(\$) | Fees Paid (\$) | | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | | |
| 2. EXCESS CLAIM FI | EES | | | | | | Small Entity | | | |
| Fee Description | | | | | | <u>Fee (\$)</u> | Fee (\$) | | | |
| Each claim over 20 (ir | ncluding Rei | ssues) | | | | 50 | 25 | | | |
| Each independent clai | | cluding Reiss | ues) | | | 200 | 100 | | | |
| Multiple dependent claims | | | | 360 | | | 180 | | | |
| Total Claims | | | | Fee Paid (\$) | | | <u>Dependent Claims</u> (i) <u>Fee Paid (\$)</u> | | | |
| - 20 or H | | _ X | = | | | <u>Fee (\$</u> | oj <u>ree Palu (\$)</u> | | | |
| HP = highest number o | total claims p Extra | | Fee(\$) | Fee Paid (\$) | | | | | | |
| Indep. Claims - 3 or HP | | | | ree raid (4) | | | | | | |
| HP = highest number o | | _ X claims paid for. | if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | | | | |
| 1001 (Total up to a whole manuscry x | | | | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) No. Freshirk Specification, \$130 for (no small entity discount) | | | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): | | | | | | | | | | |
| Cuter (c.B., take tilling survivinger). | | | | | | | | | | |
| Cauput | | | | | | | | | | |
| SUBMITTED BY | 0 | 0 | Ø1. | Registration No. | 33,568 | Tables | 202-824-3000 | | | |
| Signature Name (Print/Type) | usan A. V | Volffe | ~~ | (Attorney/Agent) | | Telephone | October 11, 2005 | | | |

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